

Chapter 43: MINIMUM STANDARDS OF OPERATION FOR BIRTHING CENTERS

Subchapter 1 INTRODUCTION

Rule 43.1.1 On April 12, 1985, the Mississippi Legislature passed an Act to provide for the licensing of birthing centers by the department or its successor; to provide for license fees; to provide for hearings prior to the denial, suspension, or revocation of a license; to provide for appeals from the decision at any such hearing; to provide penalties for violations of this act, and for related purposes.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.1.2 The purpose of this act is to protect and promote the public welfare by providing for the development, establishment, and enforcement of certain standards in the maintenance and operation of "birthing centers" which will ensure safe, sanitary, and nationally recognized best practice standards adequate care of individuals in such institutions.

SOURCE: Miss. Code Ann. §41-77-3 and §41-77-11

Rule 43.1.3 A "birthing center" is a home-like facility where low risk births are planned to occur following a normal, uncomplicated pregnancy. A "birthing center" has sufficient space to accommodate participating family members and support people of the woman's choice. A "birthing center" provides midwifery practice to childbearing women during pregnancy, birth, and puerperium and to the infant during the immediate newborn period by certified nurse-midwives or by an obstetrician or family physician or osteopathic physician. A "birthing center" has specified access to acute care obstetric and newborn services.

SOURCE: Miss. Code Ann. §41-77-1 and §41-77-11

Subchapter 2 GENERAL: LEGAL AUTHORITY

Rule 43.2.1 **Adoption of Regulations.** Under and by virtue of the authority vested in it by Chapter 503 of the Laws of Mississippi, 1985, Regular Legislative Session, the department, as licensing agency, does hereby adopt and promulgate the following rules, regulations, and standards governing birthing centers licensed to operate in the State of Mississippi. The American Association of Birth Centers (AABC) Standards for Birth Centers are hereby incorporated by reference. In order to be licensed by the Mississippi State Department of Health, each birth center shall be in compliance with the AABC Standards for Birth Centers.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.2.2 **Procedures Governing Amendments.** The rules, regulations, and minimum standards for birthing center facilities may be amended by the licensing agency from time to time as necessary to promote the health, safety, and welfare of persons receiving services in such institutions.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.2.3 **Inspections Required.** The department shall inspect each birthing center for which a license has been issued or by persons, delegated authority by said Department on an annual basis at such intervals as the Department may direct. The department and/or its authorized representatives shall have the right to inspect construction work in progress. New birthing center facilities shall not be licensed without having first been inspected for compliance with these rules, regulations, and minimum standards.

SOURCE: Miss. Code Ann. §41-77-11 and §41-77-17

Rule 43.2.4 **Definitions:** A list of selected terms often used in connection with these rules, regulations, and standards follows.

1. **Administrator.** The term "administrator" shall mean a person who is delegated the responsibility for the implementation and proper application of policies and programs established by the governing authority of the facility and is delegated responsibility for the establishment of safe and effective administrative management, control, and operation of the services provided.
2. **Birthing Center.** A "Birthing Center" shall mean a publicly or privately owned facility, place or institution constructed, renovated, leased, or otherwise established where non-emergency births are planned to occur away from the mother's usual residence following a documented period of prenatal care for a normal uncomplicated pregnancy which has been determined to be a low risk through a formal risk scoring examination. A licensed physician, or certified nurse midwife and a registered nurse shall provide care in a birthing center. Services provided in a birthing center shall be limited in the following manner:
 - A. Surgical services shall be limited to those normally performed during uncomplicated childbirth, such as episiotomy and repair, and shall not include operative obstetrics or caesarean sections.
 - B. Labor shall not be inhibited, stimulated, or augmented with chemical agents during the first or second stage of labor.
 - C. Systemic analgesia may be administered and local anesthesia for prudential block and episiotomy repair may be performed. General and conducted anesthesia shall not be administered at birthing

centers.

- D. Patients shall not remain in the facility in excess of twenty-four (24) hours.
 - E. Hospitals are excluded from the definition of a "birthing center" unless they choose to and are qualified to designate a portion or part of the hospital, as a birthing center, and nothing herein shall be construed as referring to the usual service provided the pregnant female in the obstetric gynecology service of an acute care hospital. Such facility or center, as heretofore stated, shall include the offices of physicians in private practice alone or in groups of two (2) or more; in addition, such facility or center rendering service to pregnant female persons, as stated heretofore and by the rules and regulations promulgated by the licensing agency in furtherance thereof, shall be deemed a "birthing center" whether using a similar or different name. Such center of facility if in any manner is deemed to be or considered to be operated or owned by a hospital or a hospital holding leasing or management company, for profit or not for profit, is required to comply with all birthing center standards governing a "hospital affiliated" birthing center as adopted by the licensing authority.
- 3. **Certified Nurse-Midwife.** The term Certified Nurse-Midwife (referred to in document as nurse-midwife) shall currently be licensed as a registered nurse and certified nurse-midwife by the Mississippi Board of Nursing. This individual shall have at least one year of experience in labor and delivery and/or Newborn Intensive Care and trained and certified annually in adult and infant CPR and infant resuscitation.
 - 4. **Family.** A term encompassing significant others of the pregnant women be they related or not.
 - 5. **License.** The term "license" shall mean the document issued by the Mississippi State Department of Health and signed by the Executive Director of the Mississippi State Department of Health.
 - 6. **Licensee.** The term "licensee" shall mean the individual to whom the license is issued and upon whom rests the responsibility for the operation of the birthing center in compliance with these rules, regulations and minimum standards.
 - 7. **Licensing Agency.** Licensing agency shall mean the department of Health or its successor agency.
 - 8. **Licensure.** shall constitute authority to receive patients and perform the services included within the scope of these rules, regulations, and minimum standards.

9. **Licensed Physician (referred to in document as physician).**
 - A. Shall currently be licensed by the Mississippi Board of Medical Licensure as M.D. or D.O.
 - B. Shall have at least one year of experience in obstetrics and be trained and annually certified in adult and infant CPR and infant resuscitation.
 - C. Shall have good mental and physical health.
10. **May.** The term "may" indicate permission.
11. **Normal Uncomplicated Pregnancy.** Pregnancy course that is risked by the Holister or other approved standard risk scoring method at each visit, acceptable to the licensing agency, which determines low risk criteria.
12. **Organized Obstetrical Service.** A hospital shall consist of an obstetrician and a pediatrician on the active staff and 24-hour emergency room and caesarean section capability within thirty (30) minutes, and shall provide skilled nursing care, facilities and equipment appropriate for the patient being transferred.
13. **Patient.** A pregnant female who plans to deliver away from her usual residence following a documented period of prenatal care for a normal uncomplicated pregnancy, which has been determined to be low risk through a formal risk scoring examination. The woman has formally agreed to deliver in the birthing center prior to labor.
14. **Person.** The term "person" shall mean any individual, firm, partnership, corporation, company, association or joint stock association, or any licensee herein or the legal successor thereof.
15. **Registered Nurse (referred to in document as nurse).**
 - A. Shall currently be licensed by the Mississippi Board of Nursing.
 - B. Shall have a least one year of experience in obstetrics and be trained and annually certified in adult and infant CPR and infant resuscitation.
 - C. Shall have good mental and physical health.
16. **Shall.** The term "shall," indicates mandatory requirement(s).

17. **Should.** The term "should" indicate recommendations(s).

18. **Written Agreement.** The birthing center shall have obtained a written agreement with a hospital which has an organized obstetrical service with an obstetrician and a pediatrician on the active staff and 24-hour emergency care and caesarean section capability within thirty (30) minutes, providing such service on a continuing basis, stating that said hospital agrees to accept from the birthing center such cases as may need to be referred for whatever reason from the birthing center, and agrees to accept phone consultation for problems that arise in the birthing center.

SOURCE: Miss. Code Ann. §41-77-1 and §41-77-11

Subchapter 3 STAFFING

Rule 43.3.1 **Employee Health Screening.** Every employee of a birthing center who comes in contact with patients shall receive a health screening by a licensed physician, nurse practitioner/physician assistant or employee health nurse who conduct exams prior to employment. Facilities shall comply with recommendations from the Centers for Disease control and/or the Mississippi State Department of Health regarding baseline employee TB testing and routine serial employee TB testing and education.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.3.2 **Criminal History Record Checks.**

Definitions: A list of selected terms often used in connection with these rules, regulations and standards follows.

1. **Employee.** For the purpose of fingerprinting and criminal background history checks, employee shall mean any individual employed by a covered entity. The term "employee" also includes any individual who by contract with the covered entity provides direct client care in a client's room or in treatment rooms.
2. The term employee does not include healthcare professional/technical students, as defined in Section 37-29-232, performing clinical training in a licensed entity under contracts between their schools and the licensed entity, and does not include students at high schools who observe the treatment and care of clients in a licensed entity as part of the requirements of an allied health course taught in the school if:
 - A. The student is under the supervision of a licensed healthcare provider;
and
 - B. The student has signed the affidavit that is on file at the student's school stating that he or she has not been convicted of or plead guilty or nolo

contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, any sex offenses listed in section 45-33-23 (g), child abuse, arson, grand larceny, burglary, gratification of lust, aggravated assault, or felonious abuse and/or battery of a vulnerable adult, or that any such conviction or plea was reversed on appeal or a pardon was granted for the conviction or plea.

- C. Further, applicants and employees of the University of Mississippi Medical Center for whom criminal history record checks and fingerprinting are obtained in accordance with Section 37-115-41 are exempt from application of the term employee under Section 41-75-13.
- 3. **Covered Entity.** For the purpose of criminal history record checks, "covered entity" means a licensed entity or a healthcare professional staffing agency.
- 4. **Licensed Entity.** For the purpose of criminal history record checks, the term "licensed entity" means a Birthing Center.
- 5. **Health Care Professional Vocational Technical Student.** For purposes of criminal history record checks, the term means a student enrolled in a healthcare professional/vocational technical academic program.
- 6. **Direct Client Care or Services.** For the purposes of fingerprinting and criminal background history checks, the term "direct client care" means direct hands-on medical client care and services provided by an individual to a client, in a client's room or treatment room. Individuals providing direct client care may be directly employed by the facility or provides client care on a contractual basis.
- 7. **Documented Disciplinary Action.** For the purpose of fingerprinting and criminal background history checks, the term "documented disciplinary action" means any action taken against an employee for abuse or neglect of a client.
- 8. Pursuant to Section 43-11-13, Mississippi Code of 1972, the covered entity shall require to be performed a disciplinary check with the professional licensing agency, if any, for each employee to determine if any disciplinary action has been taken against the employee by the agency, and a criminal history record check on:
 - A. Every new employee of a covered entity who provides direct client care or services; and
 - B. Every employee of a covered entity who has documented disciplinary action by his or her present employer.

9. Except as otherwise provided in this paragraph, no employee shall be permitted to provide direct client care until the results of the criminal history record check have revealed no disqualifying record or the employee has been granted a waiver. Provided the covered entity has documented evidence of submission of fingerprints for the background check, any person may be employed and provide direct client care on a temporary basis pending the results of the criminal history record check but any employment offer, contract, or arrangement with the person shall be voidable, if he/she receives a disqualifying criminal record check and no waiver is granted.
10. If such criminal history record check discloses a conviction; a guilty plea; and/or a plea of nolo contendere to a crime that is job-related which has not been reversed on appeal, or for which a pardon has not been granted, the applicant/employee may not be eligible to be employed at the licensed facility:
 - A. Possession or sale of drugs;
 - B. Murder;
 - C. Manslaughter;
 - D. Armed robbery;
 - E. Rape; or
 - F. Sexual battery.
11. Sex offense listed in Section 45-33-23 (g), Mississippi Code of 1972:
 - A. Child abuse;
 - B. Arson;
 - C. Grand larceny;
 - D. Burglary;
 - E. Gratification of lust;
 - F. Aggravated assault;
 - G. Felonious abuse and/or battery of vulnerable adult;
 - H. Any felony; or

I. Identity theft.

12. Documentation of verification of the employee's disciplinary status, if any, with the employee's professional licensing agency as applicable, and evidence of submission of the employee's fingerprints to the licensing agency must be on file and maintained by the facility prior to the new employees first date of employment. The covered entity shall maintain on file evidence of verification of the employee's disciplinary status from any applicable professional licensing agency and of submission and/or completion of the criminal record check, a copy of the referenced notarized letter addressing the individual's suitability for such employment.
13. Pursuant to Section §43-11-13, Mississippi Code of 1972, the licensing agency shall require every employee of a covered entity employed prior to July 01, 2003, to sign an affidavit stating that he or she does not have a criminal history as outlined in paragraph (3) above.
14. From and after December 31, 2003, no employee of a covered entity hired before July 01, 2003, shall be permitted to provide direct patient care unless the employee has signed an affidavit as required by this section. The covered entity shall place the affidavit in the employee's personnel file as proof of compliance with this section.
15. If a person signs the affidavit required by this section, and it is later determined that the person actually had been convicted of or pleaded guilty or nolo contendere to any of the offenses listed herein, and the conviction or pleas has not been reversed on appeal or a pardon has not been granted for the conviction or plea, the person is guilty of perjury as set out in Section §43-11-13, Mississippi Code of 1972. The covered entity shall immediately institute termination proceedings against the employee pursuant to the facility's policies and procedures.
16. The covered entity may, in its discretion, allow any employee unable to sign the affidavit required by paragraph (7) of this subsection or any employee applicant aggrieved by the employment decision under this subsection to appear before the covered entity's hiring officer, or his or her designee, to show mitigating circumstances that may exist and allow the employee or employee applicant to be employed at the covered entity. The covered entity, upon report and recommendation of the hiring officer, may grant waivers for those mitigating circumstances, which shall include, but not be limited to: (1) age at which the crime was committed; (2) circumstances surrounding the crime; (3) length of time since the conviction and criminal history since the conviction; (4) work history; (5) current employment and character references; and (6) other evidence demonstrating

the ability of the individual does not pose a threat to the health or safety of the patients in the licensed facility.

17. The licensing agency may charge the covered entity submitting the fingerprints a fee not to exceed Fifty Dollars (\$50.00).
18. Should results of an employee applicant's criminal history record check reveal no disqualifying event, then the covered entity shall, within two (2) weeks of the notification of no disqualifying event, provide the employee applicant with a notarized letter signed by the chief executive officer of the covered, or his or her authorized designee, confirming the employee applicant's suitability for employment based on his or her criminal history record check. An employee applicant may use that letter for a period of two (2) years from the date of the letter to seek employment at any covered entity licensed by the Mississippi State Department of Health without the necessity of an additional criminal record check. Any covered entity presented with the letter may rely on the letter with respect to an employee applicant's criminal background and is not required for a period of two (2) years from the date of the letter to conduct or have conducted a criminal history record check as required in this subsection.
19. For individuals contracted through a third party who provide direct client care as defined herein, the covered entity shall require proof of a criminal history record check.
20. Pursuant to Section 41-75-13, Mississippi Code of 1972, the licensing agency, the covered entity, and their agents, officers, employees, attorneys and representatives shall be presumed to be acting in good faith for any employment decision or action taken under this section. The presumption of good faith may be overcome by a preponderance of the evidence in any civil action. No licensing agency, covered entity, nor their agents, officers, employees, attorneys or representatives shall be held liable in any employment discrimination suit in which an allegation of discrimination is made regarding an employment decision authorized under this section.

SOURCE: Miss. Code Ann. §41-77-11

Subchapter 4 TYPE OF LICENSE

Rule 43.4.1 License. No license shall be issued to any facility, which fails to limit the clinical practice in the following manner:

1. Surgical services shall be limited to those normally performed during uncomplicated childbirth, such as episiotomy and repair, and shall not include operative obstetrics or Caesarean sections;
2. Labor shall not be inhibited, stimulated or augmented with chemical agents during the first or second stage of labor;

3. Systemic analgesia may be administered and local anesthesia for pudendal block and episiotomy repair may be performed. General and conductive anesthesia shall not be administered at birthing centers;
4. Patients shall not remain in the facility in excess of twenty-four (24) hours.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.4.2 Regular License. A license shall be issued to each birthing center that meets the requirements as set forth in these regulations. In addition, no birthing center facility may be licensed until it shows conformance to the regulations establishing minimum standards for prevention and detection of fire, as well as for protection of life and property against fire.

SOURCE: Miss. Code Ann. §41-77-11

Subchapter 5 LICENSING

Rule 43.5.1 Application and Annual Report & Fees- Application for a license or renewal of a license shall be made in writing to the department on forms provided by the department, which shall contain such information as the department may require. The application shall require reasonable, affirmative evidence of ability to comply with these rules, regulations, and minimum standards. Each initial and renewal licensure application, unless suspended or revoked, shall be accompanied by a fee as set by the legislation according to sections MS Code § 41-77-9 & MS Code § 41-77-25.

Each initial and renewal licensure application, unless suspended or revoked, shall be accompanied by a fee as set by the Board, made payable to the Mississippi State Department of Health. Renewal of licenses shall occur on an annual basis. Fees are not refundable.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.5.2 To be eligible for licensure in MS under this section, a birth center must be accredited by the Commission for Accreditation for Birthing Centers (CABC) or must obtain accreditation within six months of the date of the application for licensure. If the birth center loses its accreditation, the center must immediately notify the department.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.5.3 Issuance of License. All licenses issued by the department shall set forth the name of the birthing center, the location, the name of the licensee, and the license number.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.5.4 **Expiration of License.** Each license shall expire on June 30 following the date of issuance.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.5.5 **Denial or Revocation of License: Hearings and Review.** The department of Health, after notice and opportunity for a hearing to the applicant or licensee, is authorized to deny, suspend, or revoke a license in any case in which it finds that there has been a substantial failure to comply with the requirements established under the law and these regulations. A facility that has had its license revoked may not apply for a license for five years after the revocation has occurred.

Also, the following shall be grounds for denial or revocation of license:

1. Fraud on the part of the licensee in applying for a license or renewal of license.
2. Willful or repeated violations by the licensee of any of the provisions of Miss. Code Ann. §41-77-1 et seq. and/or of the rules, regulations, and minimum standards established by the licensing agency.
3. Use of a controlled substance not prescribed by a licensed healthcare professional.
4. Use of alcoholic beverages by the licensee or other personnel of the licensed facility to the extent which threatens the well-being or safety of the residents.
5. Conviction of the licensee of a job-related felony and misdemeanor.
6. Publicly misrepresenting the licensed facility and/or its services.
7. Permitting, aiding, or abetting the commission of any unlawful act.
8. Conduct or practices detrimental to the health or safety of patients and employees of said licensed facility. Detrimental practices include but are not limited to:
 - A. Cruelty to a patient or indifference to the needs which are essential to their general well-being and health.
 - B. Misappropriation of the money or property of a patient.
 - C. Inadequate staff to provide safe care of a patient.

Failure to transfer a patient whose condition demands care beyond the level of care provided by the licensed facility as determined by its classification.

SOURCE: Miss. Code Ann. §41-77-11 and §41-77-19

Rule 43.5.6 Mississippi State Department of Health shall be notified, in writing, of any of the following within 30 days prior the occurrence.

1. Address/location,
2. Facility name,
3. Phone number;
4. Hours of operation/24-hour contact procedure,
5. Change in address or phone number,
6. Administrator,
7. Director of nursing, and
8. Cessation of business.

SOURCE: Miss. Code Ann. §41-77-11 and §41-77-19

Subchapter 6 RIGHT OF APPEAL

Rule 43.6.1 **Provision for hearing and appeal following denial or revocation of license is as follows:**

1. Administrative Decision. The department will provide an opportunity for a fair hearing to every applicant or licensee who is dissatisfied with administrative decisions made in the denial or revocation of license.
2. The licensing agency shall notify the applicant or licensee by registered mail or personal service the particular reasons for the proposed denial or revocation of license. Upon written request of applicant or licensee within ten (10) days of the date of notification the licensing agency shall fix a date not less than thirty (30) days from the date of such service at which time the applicant or licensee shall be given an opportunity for a prompt and fair hearing.
3. On the basis of such hearing or upon default of the applicant or licensee, the licensing agency shall make a determination specifying its findings of fact and conclusions of law. A copy of such determination shall be sent by registered mail to the last known address of the applicant or licensee or served personally upon the applicant or licensee.
4. The decision revoking, suspending, or denying the application or license

shall become final thirty (30) days after it is so mailed or served unless the applicant or licensee, within such thirty (30) day period, appeals the decision to the Chancery Court in the county in which the facility is located, in the manner prescribed in Section 43-11-23, Mississippi Code of 1972, as amended. An additional period may be granted at the discretion of the licensing agency.

SOURCE: Miss. Code Ann. §41-77-11 and §41-77-21

Rule 43.6.2 **Penalties for Violations.** Any person or persons or other entity or entities establishing, managing or operating a birthing center or conducting the business of a birthing center without the required license, or which otherwise violate any of the provisions of the Minimum Standards promulgated by the Mississippi State Department of Health as amended, or the rules, regulations or standards promulgated in furtherance of any law in which the department has authority therefore shall be subject to the penalties and sanctions of Section 41-7-209.

SOURCE: Miss. Code Ann. §41-77-11 and §41-77-23

Subchapter 7 PATIENT TRANSFER

Rule 43.7.1 The patient shall be transferred when necessary to a hospital which shall have an organized obstetrical and newborn service which shall provide for an obstetrician and pediatrician on staff, 24-hour emergency care, and caesarean section capability within thirty (30) minutes of leaving the birthing center and shall provide skilled nursing care and facilities and equipment appropriate for the patient being transferred, having been notified on initiation of transfer. Facilities shall have a written policy that addresses the procedure for transfer.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.7.2 **Written Agreement.** The written agreement shall state that no license shall be issued to a “birthing center” until such “birthing center” shall have obtained a written agreement with a hospital, which has organized obstetrical service and provides such service on a continuing basis. The written agreement shall state that the hospital agrees to accept from the birthing center such cases as need to be referred for whatever reason from the birthing center, and for phone consultation for problems that arise in the birthing center. [**Appropriate transfer criteria for agreement with hospital.**] The facility must follow all written policies developed by the licensed facility.

SOURCE: Miss. Code Ann. §41-77-7 and §41-77-11

Subchapter 8 DISASTER PREPAREDNESS

Rule 43.8.1 The Licensed Entity shall develop and maintain a written preparedness plan utilizing the Emergency Operations Plan (EOP) Template developed by the MSDH Office of Emergency Planning and Response. “All Hazards” and “Whole Community”

approach to emergency and disaster planning. The plan must include procedures to be followed in the event of any pandemic, act of terrorism, or man-made or natural disaster as appropriate for the specific geographical location. The final draft of the Emergency Operations Plan (EOP), will be reviewed by the Office of Emergency Planning and Response, Mississippi State Department of Health, or their designates, for conformance with the “All Hazards Emergency Preparedness and Response Plan.” Particular attention shall be given to critical areas of concern which may arise during any “all hazards” emergency whether required to evacuate or to sustain in place. Additional plan criteria or a specified EOP format may be required as deemed necessary by the Office of Emergency Planning and Response. The nine (9) critical areas of consideration are:

1. Communications - Facility status reports shall be submitted in a format and a frequency as required by the Office of EOP;
2. Resources and Assets;
3. Safety and Security;
4. Staffing;
5. Infrastructure (Water, sewer, electricity, data systems, etc.);
6. Clinical Activities;
7. Exercises - Exercises shall be conducted a minimum of (2) times per year;
8. Smoke Detectors/Extinguishers (refer to NFPA 10 and NFPA 72); and
9. Continuity of Operations Planning (COOP) to include surge and alternate care sites.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.8.2 Emergency Operations Plans. Emergency Operations Plans (EOPs) must be exercised and reviewed annually or as directed by the Office of Emergency Planning and Response. Written evidence of current approval or review of provider EOPs, by the Office of Emergency Planning and Response, shall accompany all applications for facility license renewals.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.8.3 Fire Drills. Fire drills shall be conducted one (1) per shift per quarter. Employees shall participate in a fire drill at least four (4) times per year. Written records of all drills shall be maintained, indicating content of and attendance at each drill. A fire evacuation plan shall be posted in each facility in a conspicuous place and kept current. The facility shall have a posted plan for evacuation of patients, staff, and

visitors in case of fire or another emergency. The birth center maintains functioning smoke alarms, appropriately placed fire extinguisher to control limited fires and emergency-powered lighting; identifies exits; protects stairwells with fire doors.

SOURCE: Miss. Code Ann. §41-77-11

Subchapter 9 PLANS AND SPECIFICATIONS

Rule 43.9.1 Inspections. The department shall inspect each birthing center for which a license has been issued or by persons, delegated authority by said department on an annual basis at such intervals as the department may direct. The department and/or its authorized representatives shall have the right to inspect construction work in progress. New birthing center facilities shall not be licensed without having first been inspected for compliance with these rules, regulations, and minimum standards.

1. Construction shall not be started for any institution subject to these standards (whether new or remodeling or additions to an existing licensed birthing center) until the plans and specifications for such construction or remodeling have been submitted to the Licensing Agency in writing and its approval of the changes given in writing.
 - A. Exception: Foundation changes made necessary by unanticipated conditions, or any conditions which present a hazard to life or property if not immediately corrected.
 - B. New Construction, Additions, and Major Alterations. When construction is contemplated for new buildings, conversions, or additions to existing building coming within the scope of rules, plans, and specifications shall be submitted for review by the Department.
 - C. Minor Alterations and Remodeling. Minor alterations and remodeling which do not affect the structural integrity of the building, change functional operation, affect fire safety, and add services to those for which the birthing center is licensed need not be submitted for review.
 - D. Local Requirements. The birthing center shall comply with all local zoning, building, and fire ordinances. A birthing center may not be operated in a private residence.

SOURCE: Miss. Code Ann. §41-77-11

Rule 43.9.2 Life Safety Codes. Physical Plant and Operational Standards.
The following minimum physical plant and operational standards shall be met:

1. **Construction.** For any existing construction, as of the date of this standard, shall meet, at a minimum, NFPA 101 Life Safety Code, current edition and the FGI (Facility Guidelines Institute) Guidelines for

Design and Construction of Health Care Facilities. In the event of the construction of a new birthing center or substantial modification of an existing facility, any subsequent edition of NFPA, Life Safety Code may be used, provided the licensing agency approve the use of such edition and that all construction and/or modifications meet the requirements of the approved edition.

- A. The construction of the building should be a free-standing building.
- B. Automatic Sprinklers Required. Facilities shall be protected throughout by a supervised automatic sprinkler system installed in accordance with the current edition of NFPA 13, Installation of Sprinkler Systems.
- C. Fire Code Items:
 - i. Fire extinguishers in accordance with current edition NFPA 10, Standard for Portable Fire Extinguishers.
 - ii. Fire alarms and smoke detectors in accordance with current edition of NFPA 72, National Fire Alarm Code.
- 2. The center shall provide sufficient space and equipment for patient and visitor waiting area, examination and treatment rooms, birth rooms, special care capability, and for staff and administrative areas. Birth rooms shall each have at least 200 square feet of area, must include bathroom, toilet, or entry way, and be designed and located to prevent traffic through them to any other part of the center (Facility Guidelines Institute).
- 3. The licensing agency may deny the center a license if it does not comply with Federal, State, and local laws, codes, ordinances, and regulations which apply to its location, construction, maintenance, and operation.
- 4. It shall be the responsibility of the governing body to assure that the center is in a safe condition at all times, and that a fire inspection record is maintained on equipment, systems, and areas that may present a hazard to occupants.
- 5. In addition to requirements specified herein, and those required by local ordinances or regulations, the construction of a birth center shall meet the requirements of the current version National Fire Protection Association (NFPA) 101 shall be accompanied by written evidence that these requirements have been met.
- 6. Entrances for patients shall be connected to the public right-of-way by a hard-surfaced, unobstructed walkway in good repair. Access for handicapped individuals shall be provided at a minimum of one entrance.

A hard-surfaced, unobstructed road or driveway for use by ambulances or other emergency vehicles shall run from at least one entrance of the building to the public right-of-way. The doorway of such entrance shall be immediately adjacent to the road or driveway. If such doorway is not on the same level as the road, a ramp shall provide a continuous, unobstructed plane to the entrance.

7. Services provided in multi-story buildings shall be accessible by an elevator of adequate size to accommodate a standard wheeled litter patient and two attendants. Multi-story buildings will be considered to have met this requirement when patients are located only on ground level floors with outside exits. A stairway or ramp of adequate dimensions shall be available for transfer of patients in case of power failure.
8. The birth center shall be constructed, equipped, and maintained to assure the safety of patients and personnel. The following requirements shall apply within the center:
 - A. Birth rooms shall be designed and located to prevent traffic through them to any other part of the center.
 - B. The walls and floors of birth rooms, examination rooms and staff dressing, and scrub areas shall be of material that will permit frequent washing and cleaning.
 - C. Staff dressing rooms and scrub facilities shall be convenient to the birth rooms, and shall include a knee, elbow, wrist or foot operated sink soap dispenser and brushes.
 - D. Toilet and handwashing facilities shall be accessible to patients from the birth rooms. Bathrooms shall be equipped with handrails for toilets and showers. Convenient handwashing facilities shall be provided for both staff and patient and shall be provided with soap dispenser and individual or disposable towels. The use of common towels is prohibited.
 - E. The center shall be arranged and organized in such a manner as to ensure the comfort, safety, hygiene, privacy, and dignity of patients treated therein.
 - F. A clean up room for equipment shall be provided.
 - G. The center shall have an audible nurse call system with control switches in all birth rooms and bathrooms which can be activated during an emergency.
 - H. The center shall have special care capability which includes but is not

necessarily limited to the following, for both adults and infants: resuscitation equipment, intravenous solutions, drugs, oxygen, suction, infant stethoscope, and transfer isolette. Such emergency equipment shall be provided on each floor on which patients are served.

- I. Each birth room shall have an infant resuscitation tray with a laryngoscope, positive pressure bag and mask and endotracheal tubes.
9. The center shall provide space and facilities for administrative activities, including offices, medical records and other files and storage of supplies.
10. A waiting room and patient admissions area(s) shall be provided. There shall also be space for storage of personal belongings of staff, patients, and visitors.
11. The center shall have adequate and conveniently located toilets and handwashing facilities for its staff, employees, patients, and visitors.

Housekeeping, Laundry, Maintenance and Sterile Supplies:

1. The center shall ensure that housekeeping and maintenance is adequate to maintain the center and equipment in a clean condition and state of good repair. An equipment clean-up area with adequate plumbing, including a sink with counter, shall be provided within the center.
2. Laundry service shall be provided either in house or by contractual arrangement. Separate space and facilities shall be provided for receiving, sorting, and storing soiled laundry and for the sorting, storing, and issuing of clean laundry, if reusable items are utilized. Linens used for draping must be sterilized. All reusable linens, including those used as sterilizing wrappers, must be laundered before reuse. Linens shall be handled, stored, processed, and transported in such a manner as to prevent the spread of infection. Soiled and clean linen must be handled and stored separately.
3. There shall be adequate space and facilities for receiving packaging and proper sterilization and storage of supplies and equipment consistent with the services to be provided.
4. Special precaution shall be taken to ensure that sterile instruments and supplies are kept separate from nonsterile instruments and supplies. Equipment for sterilization of instruments and supplies shall be conveniently located and of adequate capacity for the workload. Records shall be maintained to assure quality control, including, date, time, and temperature of each batch of sterilized supplies and equipment. Sterilization performance shall be checked, and records shall be kept.

Sterile items shall be dated and utilized, based on established procedures.

Electrical Power:

1. All electrical work and equipment shall be designed and installed in accordance with State and local laws and ordinances.
2. All areas of the center shall have sufficient artificial lighting for designated purposes.
3. All centers shall have an alternative lighting source for emergency use in the event of a power failure.
4. Centers shall equip the building with an emergency generating system; Level 1, Type 10 or equivalent in accordance with current NFPA 110 Standard for Emergency and Standby Power Systems; with adequate generating power to maintain full power to the building in the case of power failure.

SOURCE: Miss. Code Ann. §41-77-11

Subchapter 10 WASTE MANAGEMENT

Rule 43.10.1 All facilities must comply with the *Adopted Standards for the Regulation of Medical Waste* in Health Care Facilities licensed by the Mississippi State Department of Health. These Standards are published on the MSDH website.

SOURCE: Miss. Code Ann. §41-77-11

Subchapter 11 INFECTION CONTROL

Rule 43.11.1 The following infection control standards shall be met:

1. The birthing center must maintain and document an effective infection control program that protects patients, families, visitors, and birthing center personnel by preventing and controlling infections and communicable diseases.
2. The birthing center inpatient facility must have an active surveillance program that includes specific measures for prevention, early detection, control, education, and investigation of infections and communicable diseases in the birthing center. There must be a mechanism to evaluate the effectiveness of the program(s) and take corrective action when necessary. The program must include implementation of nationally recognized systems of infection control guidelines to avoid sources and transmission of infections and communicable diseases.

3. The birthing center must follow accepted standards of practice to prevent the transmission of infections and communicable diseases, including the use of standard precautions.

SOURCE: Miss. Code Ann. §41-77-11

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